PART B - FEE(S) TRANSMITTAL

DEC 1 5 2005 (S)	with applicable		n		for Patents ginia 22313-1450	
INSTRUCTIONS: This form should be used for appropriate of further correspondence including indicates press corrected below or directed others. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block	transmitting the ISS the Patent, advance (wise in Block 1, by (SUE FEE and no (a) specifying	r <u>Fax</u> d PUBLIC otification g a new c	CATION FEE (if req of maintenance fees orrespondence addres	uired). Blocks 1 through 5 will be mailed to the curres; and/or (b) indicating a se	should be completed whe nt correspondence address parate "FEE ADDRESS" f
PAUL C. OESTREICH MORRISS O'BRYANT COMPAGNI 136 SOUTH MAIN STREET SUITE 700	The second secon			Note: A certificate of Fee(s) Transmittal. Transmittal. Transmittal papers. Each addition have its own certifical	f mailing can only be used his certificate cannot be used all paper, such as an assignment of mailing or transmission ertificate of Mailing or Training Fee(s) Transmittal is being with sufficient postage for fall Stop ISSUE FEE addres PTO (571) 273-2885, on the	for domestic mailings of to d for any other accompanying ment or formal drawing, mu
SALT LAKE CITY, UT 84101 /16/2005 SFELEKE2 00000022 10067625	.				Oestreich	(Depositor's name
FC:2501 700.00 QP						(Signature
FCr1504 300.00 OP				<u></u>		(Date
	_	FIRST NAME	ED INVEN	ror	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/067,625 02/04/2002 TITLE OF INVENTION: SOLID STATE VACUUM	DEVICES AND ME		len Hwu KMAKIN(G THE SAME	ISYS117880	7570
APPLN. TYPE SMALL ENTITY			T			:
SWARD ENTITE	ISSUE FI	EE .	PUI	BLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional YES EXAMINER	\$700		T	\$300	\$1000	12/12/2005
	ART UNI	IT	CLA	SS-SUBCLASS		
MACCHIAROLO, PETER J	2879		:	313-293000		
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number 1: 12 12 13 14 15 15 15 15 15 15 15		(1) the name or agents (2) the name registered 2 registered	or printing on the patent front page, list the names of up to 3 registered patent attorneys gents OR, alternatively, the name of a single firm (having as a member a stered attorney or agent) and the names of up to d, no name will be printed. 1 MORRISS 20 BRYANT 3 COMPAGNI, P.C.			
2 4 60103777	BE PRINTED ON T	III DA TIDUT	TAILC WIII	e printed.		
 ASSIGNEE NAME AND RESIDENCE DATA TO PLEASE NOTE: Unless an assignee is identified I recordation as set forth in 37 CFR 3.11. Completion (A) NAME OF ASSIGNEE 	below, no assignee d n of this form is NOT	lata will appe a substitute	ear on the for filing a		· :	ocument has been filed for
recordation as set forth in 37 CFR 3.11. Completion (A) NAME OF ASSIGNEE Innosys, Inc.	below, no assignee d n of this form is NOT (B)	lata will apper a substitute of RESIDENC	ear on the for filing a E: (CITY)	patent. If an assigne in assignment. and STATE OR COU	NTRY)	
recordation as set forth in 37 CFR 3.11. Completion (A) NAME OF ASSIGNEE	below, no assignee do not this form is NOT (B) ories (will not be prin 4b.	lata will appraisate a substitute in RESIDENC Salt atted on the parament of Farmers and Payment by	Lake atent): [Fee(s): n the armounty credit care	patent. If an assigned a sasignment. and STATE OR COU City, UT Individual Cor ant of the free(s) is enclosed. Form PTO-2038	NTRY) poration or other private grounds osed. is attached.	up entity Government
PLEASE NOTE: Unless an assignee is identified by recordation as set forth in 37 CFR 3.11. Completion (A) NAME OF ASSIGNEE Innosys, Inc. Please check the appropriate assignee category or category. 4a. The following fee(s) are enclosed: Source Source Source Source	ories (will not be prin 4b. ced) 27 CFR 1.27	lata will appraise a substitute of RESIDENC Salt ated on the pa Payment of F A check in Payment b The Direct Deposit Accord	Lake Lake atent): [Fee(s): n the arnou by credit ca ctor is here unt Numbe	patent. If an assigned a signment. and STATE OR COU City, UT Individual A Cor ant of the tre(s) is encluded. Form PTO-2038 cby authorized by challer 50-088	poration or other private groups osed. is attached. arge the required fee(s), or content of the content of th	redit any overpayment, to by of this form).
PLEASE NOTE: Unless an assignee is identified by recordation as set forth in 37 CFR 3.11. Completion (A) NAME OF ASSIGNEE INNOSYS, INC. Please check the appropriate assignee category or category. 4a. The following fee(s) are enclosed: Solution Solution	ories (will not be prin 4b. ced) 27 CFR 1.27	lata will appraise a substitute of RESIDENC Salt ated on the pa Payment of F A check in Payment b The Direct Deposit Accord	Lake Lake atent): [Fee(s): n the arnou by credit ca ctor is here unt Numbe	patent. If an assigned a signment. and STATE OR COU City, UT Individual A Cor ant of the tre(s) is encluded. Form PTO-2038 cby authorized by challer 50-088	poration or other private groups osed. is attached. gree the required fee(s), or concept (enclose an extra concept). ENTITY status. See 37 CFI paid issue fee to the applicationed attorney or agent; or the	redit any overpayment, to by of this form).

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

DEC 1 5 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

TRANSMITTAL	Filing Da
	First Na
(to be used for all correspondence after initial filing)	Group A

2

Total Number of Pages in This Submission

(including this sheet)

Application Number 10/067,625

Filing Date February 4, 2002

First Named Inventor Ruey-Jen Hwu

Group Art Unit 2879

Examiner Name Peter J. Macchiarolo

Attorney Docket No. 3070.INSY.PT

ENCLOSURES (check all that apply)					
□ Amendment / Response □ After Final □ Affidavits/declaration(s) □ Appeal Communication: □ Appeal Notice □ Appeal Brief □ Reply Brief □ Assignment with Cover Sheet □ Certified Copy of Priority □ Document(s) ☑ Check in the amount of \$1030.00 □ Credit card authorization in the amount of \$ □ Declaration & Power of Attorney	 □ Extension of Time Requestmonth □ Fee Calculation Table □ Information Disclosure Statement □ Form 1449 □ Copies of IDS References ☑ Issue Fee Transmittal & Advance Order Remarks	 Maintenance Fee Transmittal year Missing Parts Response Notification of Change of Attorney Address & Docket Number Return Postcard Revocation & Power of Attorney Status Inquiry Other: 			
SIGNATURE OF APPLICANT, ATTORNEY OR AGENT					
MORRI 136 Soi Salt Lal	Oestreich, Registration No. 44,983 SS O'BRYANT COMPAGNI, P.C. uth Main Street, Suite 700 ke City, Utah 84101 78-0071 telephone; (801) 478-0076 f	acsimile			
Signature ()		Date 12-12-05			
CERTIFICATE OF MAILING UNDER 37 CFR § 1.8					
I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, on the date indicated below, in an envelope addressed to Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.					
Typed or Printed Name Paut C. Oestreich					
Signature	/	Date [7-17-05			